

**IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF NORTH CAROLINA**

**UNITED STATES OF AMERICA,** )

)

**Plaintiff,** )

)

**Case No.: 1:17CR251-1**

**v.** )

)

**HASSIE DEMOND NOWLIN,** )

)

**Defendant.** )

**DECLARATION**

I, Monica Jones, hereby declare under penalty of perjury, pursuant to 28 U.S.C. §1746, that the following is true:

1. That I am an employee in the Office of the United States Attorney for the Middle District of North Carolina and am a person of such age and discretion as to be competent to serve process.

2. That on November 16, 2017, a Judgment was entered against the Defendant, Hassie Demond Nowlin, for criminal monetary penalties.

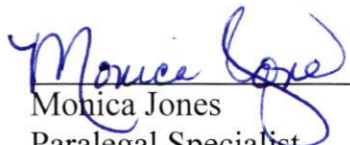
3. That a copy of the Amended Application for Writ of Execution, Notice to Defendant Debtor, Claim for Exemptions, and Writ of Execution, was deposited in the United States Mail for mailing by certified mail, return receipt requested on August 27, 2020, properly addressed to the Defendant, Hassie Demond Nowlin, at his last known address in Greensboro, North Carolina.

4. That a copy of the original return-receipt, showing date of service as September 1, 2020, is attached hereto and made a part of this Declaration of Service of said Amended Application for Writ of Execution, Notice to Defendant Debtor, Claim for Exemptions, and Writ of Execution.

5. That the Defendant herein has been duly served with the process as provided by Rule 5(b) of the Federal Rules of Civil Procedure.

I hereby declare under penalty of perjury pursuant to 28 U.S.C. § 1746 that the foregoing is true and correct to the best of my knowledge, information and belief.

Executed on September 8, 2020, in Greensboro, North Carolina.

  
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Monica Jones  
Paralegal Specialist  
Financial Litigation Unit

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hassie Demond Nowlin  
Greensboro, NC

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X C-19

☐ Agent☐ Addressee

B. Received by (Printed Name)

735

C. Date of Delivery

9-1

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7019 0700 0000 9048 8139

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15